## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 68 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Deliver Democracy** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Meyer Simon, Diane, , , Date of Receipt Mailing Address 1570 E Mountain Dr 2022 City Zip Code State Transaction ID: 21572736 CA Santa Barbara 93108-1302 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Not Employed Not Employed Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 1021.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ActBlue Date of Receipt Mailing Address PO Box 441146 2022 City State Zip Code Transaction ID: 21572736E MA West Somerville 02144-0031 Amount of Each Receipt this Period FEC ID number of contributing C00401224 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ Primary General Note: Above Contribution earmarked through this 45047.37 Other (specify) organization. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Tully, Richard, , , Date of Receipt Mailing Address 718 Afton Ct 04 2022 City State Zip Code Transaction ID: 21572836 CA Redlands 92374-6343 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Loma Linda Physicians Medical Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 445.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7